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PTO/SB/30 atent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

## REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application No. 10/586,983  Filing Date January 21, 2005  First Named Inventor Schempp  Art Unit 2874  Examiner Name Omar R. Rojas  Attorney Docket No. A4-178 US	U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE							
First Named Inventor Schempp Art Unit 2874 Examiner Name Omar R. Rojas	Application No.	10/586,983						
Art Unit 2874 Examiner Name Omar R. Rojas	Filing Date	January 21, 2005						
Examiner Name Omar R. Rojas	First Named Inventor	Schempp						
	Art Unit	2874						
Attorney Docket No. A4-178 US	Examiner Name	Omar R. Rojas						
	Attorney Docket No.	A4-178 US						

This	This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.								
1.	<ol> <li>Submission required under 37 CFR 1.114. Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).</li> </ol>						e. If		
**		eviously submitted. If fice action may be cons					after the final		
	i.	☐ Consider the argu	ıments in	the Appeal Brief or I	Reply Brief previ	ously filed or	n		
	ii	. Dother							
	b. 🛭 E	nclosed					•		
	i.		у	iv. 🔲	Form PTO-144	9			
	ii	. Affidavit(s)/Declar	ation(s)	v. 🔲	Copies of Refe	rences listed	l in PTO-1449	)	
	ii	i. 🔲 Information Disclo	sure Stat	ement vi. 🛛	Other Return r	eceipt postc	ard		
2.	Miscella	neous							
	a. Suspe	ension of action on the I of months. (Pe		entified application is espension shall not e				(i) requi	red)
	b. Other	:							
3.	Fees. Th	ne RCE fee under 37 C	FR 1.17(e	e) is required by 37 (	CFR 1.114 when	the RCE is	filed.		
	<ul> <li>The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments, to Deposit Account No. 50-1873. I have enclosed a duplicate copy of this sheet.</li> <li>The Commissioner is hereby authorized to charge any deficiencies in the above fees or to credit any overpayments to Deposit Account No. 50-1873.</li> </ul>								
	i.		00 require	ed under 37 CFR 1.1	17(e).			\$ 810.	00
	ii	☐ One-month exten	sion of tin	ne fee of \$0.00 (37 (	CFR 1.136 and 1	.17)		\$	
	iii. An extension for has already been secured and the fee of \$ paid, therefore \$ is deducted from the total fee due.						)		
	iv	·	tion fee o	f \$130.00 (37 CFR 1	.17(i))			\$	
	v. Dother:								
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CI	aim Fee	Claims remaining after amendment		Highest Number Previously Paid For	Extra Claims Present	Rate	Add'l Claim Fee		
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							m Fee Total	\$	
			TO	TAL AMOUNT TO E	BE CHARGED T	O DEPOSIT	ACCOUNT	\$810.0	00

In re Application of Schempp Application No. 10/586,983

## Request For Continued Examination Transmittal (continued)

SIGNATURE-OF APPLICANT, ATTORNEY, OR AGENT REQUIRED								
Signature	Larres In Polaler	Date	8-29-08					
Name (Print/Type)	Larry I. Golden	Reg. No.	29,068					
Address	MOLEX INCORPORATED 2222 Wellington Court Lisle, Illinois 60532	Phone	(630) 527-4430 (telephone) (630) 416-4962 (facsimile)					
CERTIFICATE OF MAILING OR TRANSMISSION  I hereby certify that this document and all accompanying documents are, on the date indicated below, being ☑ deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" Service under 37 CFR 1.10 with Express Mail Label Number EM 129279519 US, ☐ deposited with the U.S. Postal Service with sufficient postage as First Class Mail, or ☐ facsimile transmitted to the U.S. Patent and Trademark Office at fax number: (571) 273-8300.								
Signature Sunt Budles , ,								
Name (Print/Type)	Jennifer Beedles	Date 8/	29/08					

PTO/SB/30

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a. ☐ Pre offi	a. Previously submitted. If a final Office Action is outstanding, any amendments filed after the final office action may be considered as a submission even if this box is not checked.						
i.	☐ Consider the argu	ments in	the Appeal Brief or F	Reply Brief previ	ously filed or	า	
ii.	☐ Other						
b. 🛭 End	closed						
i.		y	iv. 🗀	Form PTO-144	9		
ii.	☐ Affidavit(s)/Declar	ation(s)	v. 🗀	Copies of Refe	rences listed	in PTO-1449	)
iii.	☐ Information Disclo	sure Stat	ement vi. 🛛	Other Return r	eceipt postca	ard	
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iii.	☐ An extension for	has	s already been secui	red and the fee o	of\$ pa	aid,	(\$ )
	therefore \$	is deduct	ted from the total fee	due.			(\$)
iv.	☐ Suspension of ac	tion fee o	f \$130.00 (37 CFR 1	.17(i))			\$
v. Dother:						\$	
vi. Claim fee							
Claim Fee Claims remaining after amendment Highest Number Previously Paid For Extra Claims Present Rate Claim Fee							
Total   Minus   = x 50 = \$							
Independent							
First Prese	ntation of Multiple Cla	im 			+ 370 =	\$	
			<u>-</u>		Clai	m Fee Total	\$
		TO	TAL AMOUNT TO E	BE CHARGED T	O DEPOSIT	ACCOUNT	\$810.00

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Signature Sunt Budles							
Name (Print/Type)	ame (Print/Type) Jennifer Beedles Date 8/24/08						